

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

10/27/05 45 680

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: RELEASE MECHANISM FOR MASKS, the specification of which

(check one) ☐ is attached hereto.  
☒ was filed on September 15, 2003 as Application Serial No PCT/NZ2003/000206  
 and was amended on March 11, 2005.  
 (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

<u>521744</u> (Number)	<u>New Zealand</u> (Country)	<u>02/10/2002</u> (Day/Month/Year Filed)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<u>                    </u> (Number)	<u>                    </u> (Country)	<u>                    </u> (Day/Month/Year Filed)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<u>                    </u> (Number)	<u>                    </u> (Country)	<u>                    </u> (Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below; insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

<u>                    </u> (Number)	<u>                    </u> (Country)	<u>                    </u> (Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Richard A. Giangiorgi, Reg. 24,284; Raiford A. Blackstone, Jr., Reg. 25,156; David J. Marr, Reg. 32,915; Linda L. Palomar, Reg. 37,903; James R. Foley, Reg. 39,979; James A. O'Malley, Reg. 45,952 and Paige A. Kitzinger, Reg. 45,219.

SEND CORRESPONDENCE TO: TREXLER, BUSHNELL, GIANGIORGI, BLACKSTONE & MARR, LTD.  
105 W. ADAMS STREET, CHICAGO, IL 60603

DIRECT TELEPHONE CALLS TO: (312) 704-1890 RAIFORD A. BLACKSTONE, JR.

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application or any patent issued thereon.

1-10  
Full name of first or sole inventor **LEWIS GEORGE GRADON**  
Inventor's signature [Signature] Date 28/08/05  
Residence Auckland, New Zealand  
Citizenship New Zealand **NZ**  
Post Office Address 22 Brailsford Court, Howick, Auckland, New Zealand  
(Supply similar information and signature for second and subsequent joint inventors.)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

2-00  
Full name of second inventor **ALASTAIR EDWIN McAULEY**  
Inventor's signature [Signature] Date 24/8/05  
Residence Auckland, New Zealand  
Citizenship New Zealand **NZ**  
Post Office Address 58A Ngapuhi Road, Remuera, Auckland, New Zealand

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Full name of third inventor **CHRISTOPHER EARL NIGHTINGALE**  
Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_  
Residence Auckland, New Zealand  
Citizenship New Zealand  
Post Office Address 18 Settlers Court, 17 Newport Avenue, Poplar, London E14 2DG

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4-10  
Full name of fourth inventor **IVAN MILIVOJEVIC**  
Inventor's signature [Signature] Date 24/8/05  
Residence Auckland, New Zealand  
Citizenship New Zealand **NZ**  
Post Office Address 9 Bardia Street, Belmont, Auckland, New Zealand

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5-00  
Full name of fifth inventor **AIDAN MARK SHOTBOLT**  
Inventor's signature [Signature] Date 11/08/05  
Residence Dunedin, New Zealand **NZ**  
Citizenship New Zealand  
Post Office Address 168 Gladstone Rd, Dalmore, Dunedin, New Zealand

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DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

10/527680

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Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

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Full name of second inventor **ALASTAIR EDWIN McAULEY**

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

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Full name of third inventor **CHRISTOPHER EARL NIGHTINGALE**

Inventor's signature \_\_\_\_\_ Date 24/8/05

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Citizenship New Zealand

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Full name of fourth inventor **IVAN MILIVOJEVIC**

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence Auckland, New Zealand

Citizenship New Zealand

Post Office Address 9 Bardia Street, Belmont, Auckland, New Zealand

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Full name of fifth inventor **AIDAN MARK SHOTBOLT**

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence Dunedin, New Zealand

Citizenship New Zealand

Post Office Address 168 Gladstone Rd, Dalmore, Dunedin, New Zealand

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